

**WINDSOR CHARTER TOWNSHIP
POVERTY APPEAL APPLICATION**

(1.) ELIGIBILITY REQUIREMENTS

In order to be eligible for the poverty exemption, the claimant must do all of the following **on an annual basis**:

- 1) Own and occupy as a homestead the property for which the exemption is requested.
- 2) File a Claim with the Supervisor, Assessor or the Board of Review after January 1, 2018 but before the day prior to the last day of the Board of Review on a form provided by the local assessing unit.
- 3) Provide Federal and State income tax returns for all persons residing in the homestead including any property tax credit returns.
- 4) Produce a valid driver's license or other form of identification if requested.
- 5) Produce a deed, land contract, or other evidence of ownership of the property for which an exemption is being requested, if requested.
- 6) Meet the federal poverty income standards adopted by the governing body of the local assessing unit.
- 7) Meet the asset levels set by the governing body of the local assessing unit.

A claimant may Request a Poverty Exemption and Appeal the Property's Assessment to the Windsor Charter Township March Board of Review.

(2.) INCOME STANDARDS/ASSET TEST

The following are the federal poverty income standards that the United States Office of Management and Budget recommend that federal departments and agencies use. Windsor Charter Township has adopted these Income Levels for the basis of granting "Poverty Exemptions." These amounts are adjusted annually.

To be eligible for a poverty exemption in Windsor Charter Township for 2018 your income MAY NOT exceed these guidelines. If your income exceeds the levels listed below, you do not qualify for a Poverty Exemption:

1 person.....	\$ 12,140
2 persons.....	\$ 16,460
3 persons.....	\$ 20,780
4 persons.....	\$ 25,100
5 persons.....	\$ 29,420
6 persons.....	\$ 33,740
7 persons.....	\$ 38,060
8 persons.....	\$ 42,380
For Each Additional Person add.....	\$ 4,320

MAXIMUM ASSET STANDARDS TO BE ELIGIBLE FOR A POVERTY EXEMPTION
(PA 390 of 1994 states that the poverty exemption guidelines established by the governing body of the local assessing unit shall include an asset level test)

Windsor Charter Township has adopted the following MAXIMUM ASSET STANDARDS for a household to be eligible for a POVERTY EXEMPTION. The below asset levels DO NOT include the value of your homestead.

1 person	\$ 24,280
2 persons	\$ 32,920
3 persons.....	\$ 41,560
4 persons.....	\$ 50,200
5 persons.....	\$ 58,840
6 persons.....	\$ 67,480
7 persons.....	\$ 76,120
8 persons or more.....	\$ 84,760

If applicant household assets exceed this amount, the applicant is NOT eligible for a POVERTY EXEMPTION unless other identifiable and verifiable circumstances may be present.

(3.) POVERTY EXEMPTION APPLICATION

I/We, _____, being the owner(s) and resident(s) of the property listed below, apply for tax relief under MCL 211.7u of the General Property Tax Act.

Property Code Number _____

Property Address: _____ Phone () _____

Marital Status: _____

Age of Applicant: _____ Age of Spouse: _____

Number of Dependents: _____ Age of Dependents: (1.) _____ (2.) _____
 (3.) _____ (4.) _____
 (5.) _____ (6.) _____
 (7.) _____ (8.) _____

Have you applied for Homestead Property Tax Credit this Year? _____

How much was your Property Tax Credit? _____

ATTACH A COPY OF 1040 CR AND FEDERAL OR STATE INCOME TAX RETURN, IF FILED FOR THE CURRENT YEAR.

REAL ESTATE: Is home paid for? _____ Unpaid balance: _____

Name of Mortgage Co. _____ Monthly Payment: _____

How long have you lived at this residence? _____

Do you own, or are you buying any other property? _____

If so, list below:

Property Address	Name of Owner	Assessed Value	Amount and Date of Last Taxed Paid

Income earned from above property \$ _____

Name of Employer: _____

Address: _____

Phone No. () _____

Name of Spouse's Employer: _____

Address: _____

Phone No. () _____

List all income from salaries, Social Security, rents, pensions, unemployment compensation, disability, government pensions, workers' compensation, dividends, claims and judgments from lawsuits, alimony, child support and any other source.

Source of Income	Monthly or Annual Income

SAVINGS AND INVESTMENTS: List all savings owned by you or your spouse, including savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds or similar investments.

Name of Financial Institution or Investments	Amount on Deposit	Name on Account	Value of Investment

LIFE INSURANCE: List all policies held by you and your spouse.

Insured	Amount of Policy	Amt. Paid Monthly	Paid Up Policy	Name of Beneficiary	Relationship to Insured

MOTOR VEHICLES IN HOUSEHOLD:

Make	Year	Monthly Payment	Balance Owed

LIST ALL PERSONS LIVING IN HOUSEHOLD (Attach additional sheets if necessary)

Last Name	First Name	Age	Relationship to Claimant	Place of Employment	Contribution to Family Income

PERSONAL DEBTS (Attach additional sheets if necessary)

Creditor	Purpose of Debt	Date of Debt	Original Balance	Monthly Payment	Balance Owed

MONTHLY EXPENSES:

UTILITIES _____ FOOD _____ PHONE _____

CLOTHING _____ HEAT _____ CAR EXPENSES _____

OTHER (Specify) _____

OTHER ASSETS: List all other assets and their value that are owned or controlled by you.

Type of Asset	Value	Owner

REASON FOR REQUESTING EXEMPTION: _____

NOTICE: Any willful misstatements or misrepresentations made on this form may constitute perjury, which, under the law, is a felony punishable by fine or imprisonment.

NOTE: Do not sign until witnessed by the Supervisor, Assessor, Chair of the Board of Review or Notary Public.

The undersigned, being duly sworn, deposes and says that the statements made in the foregoing application are true and that he/she has no money, income or property other than mentioned herein.

 Petitioner
 Subscribed and sworn this _____ day of _____, 2018

 Assessor, Supervisor, Board of Review Member or Notary Public

 This Application must be received (not postmarked) no later than March 15, 2018 at 3:00 P.M.:

Meeting Address: Windsor Charter Township Hall
 300 W. Jefferson St.
 Dimondale, Michigan 48821

Mailing Address: Windsor Charter Township Assessor
 405 W. Jefferson St.
 Dimondale, Michigan 48821

FOR BOARD OF REVIEW USE

Disposition by Board of Review

Date _____

Denied: _____

Approved: _____

Assessment reduced to: _____

Chairperson _____ Second Member _____ Third Member _____

Decisions may be appealed to Michigan Tax Tribunal.
